Image# 14952661363 PAGE 1 / 9

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: over the li	If typing, type nes.	12FE4M5	
Louise's PAC					1
ADDRESS (number and street)	1150 University Avenu	Je			
Check if different	Bldg 5				
than previously reported. (ACC)	Rochester			NY [	14607
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		STATE A	ZIP CODE ▲
C C00486613		3. IS THIS REPORT	NEW (N) OR	AN (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	Jul 20 (M7)	Oct :	20 (M10) Jan 31 (YE)
Quarterly Report (Q1  July 15  Quarterly Report (Q2	(c) 12-Day		y (12P)	General	(12G) Runoff (12R)
October 15 Quarterly Report (Q3	Report for t	the: Conve	ntion (12C)	Special (	12S)
January 31 Year-End Report (YE	_	Election on	M / D D /	YIYIY	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elect		al (30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Report for t	Election on 11		2014	in the State of NY
5. Covering Period 10		014 thro	ugh 11	24	2014
I certify that I have examined this	s Report and to the be	est of my knowledge	and belief it is tr	ue, correct and	d complete.
Type or Print Name of Treasurer	Nora Tuthill				
Signature of Treasurer Nora T	Futhill	[Electro	onically Filed] [	Date 12	01 / 2014
NOTE: Submission of false, errone	ous, or incomplete infor	mation may subject th	ne person signing t	his Report to th	ne penalties of 2 U.S.C. §437g.
Office Use					FEC FORM 3X
Only					Rev. 12/2004

## SUMMARY PAGE

_	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
	Write or Type Committee Name Louise's PAC		
F	Report Covering the Period: From:	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	11 / 24 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		6500.00
	(b) Cash on Hand at Beginning of Reporting Period	14000.00	
	(c) Total Receipts (from Line 19)	0.00	10000.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14000.00	16500.00
7.	Total Disbursements (from Line 31)	5586.79	8086.79
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8413.21	8413.21
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a mul	ticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

		$\Box$	$\sim$
LOU	ise's	PP	١C

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	0.00	0.00
		0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	40000.00
(such as PACs)	0.00	10000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	2.00	10000.00
Totals to Line 33, page 5)	0.00	1000.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	200	
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	2.00	
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	10000.00
_		
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	0.00	10000.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)	511	200000000000000000000000000000000000000
(i) Federal Share	2086.79	4586.79
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	7 7 7	
Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	2086.79	4586.79
. Transfers to Affiliated/Other Party	2000.13	1000.70
Committees	0.00	0.00
Contributions to     Federal Candidates/Committees     and Other Political Committees	3500.00	3500.00
. Independent Expenditures	0.00	0.00
(use Schedule E)	5.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
Large Made	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
. Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5586.79	8086.79
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	5586.79	8086.79

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	10000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	10000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2086.79	4586.79
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	2086.79	4586.79

SCHEDULE B (FEC Form 3X)	l	, FOR LINE I	NUMBER: PAGE 6 OF 9
TEMIZED DISBURSEMENTS	Use separate schedule( for each category of the	(oricon oriny	,
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
Assistance discoveried from such December and Obligation			
Any information copied from such Reports and States or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	71		
Louise's PAC			
Full Name (Last, First, Middle Initial)			
A. Committee to Elect Martha Robert	son		Date of Disbursement
Mailing Address P.O. Box 54			11 01 2014
Mailing Address F.O. Box 54			11 01 2014
City	State Zip Code		T ID ODGG 4405
Dryden	NY 13053		Transaction ID: SB23.4135
Purpose of Disbursement Contribution		1	
Candidate Name		011	Amount of Each Disbursement this Period
Martha Robertson		Category/	500.00
	ment For: 2014	Туре	
Senate	Primary Seneral		
President	Other (specify) ▼		
State: NY District: 23			
Full Name (Last, First, Middle Initial)			
B. Kuster for Congress			Date of Disbursement
-			M M / D D / Y Y Y Y
Mailing Address P.O. Box 1498			10 23 2014
City	State Zip Code		
Concord	NH 03302		Transaction ID : SB23.4129
Purpose of Disbursement			
Contribution		011	Amount of Each Disbursement this Period
Contribution  Candidate Name		Category/	Amount of Each Disbursement this Period
Contribution Candidate Name Ann McLane Kuster	ment For: 2044		
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  House Disburse	ment For: 2014 Primary	Category/ Type	
Contribution Candidate Name Ann McLane Kuster	Primary General	Category/ Type	
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:    House   Disburser		Category/ Type	
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:    House   Disburse	Primary General	Category/ Type	
Contribution  Candidate Name  Ann McLane Kuster  Office Sought: House Senate President  State: NY District: 02	Primary General	Category/ Type	
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:    House   Senate   President   State: NY District: 02	Primary General	Category/ Type	Date of Disbursement
Contribution  Candidate Name  Ann McLane Kuster  Office Sought: House Senate President  State: NY District: 02  Full Name (Last, First, Middle Initial)	Primary General	Category/ Type	Date of Disbursement
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786	Primary	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786	Primary General	Category/ Type	Date of Disbursement
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement	Primary	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution	Primary	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought: House Senate President  State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name	Primary	Category/ Type  011 Category/	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens	Primary	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens  Office Sought:  House Disburse	Primary ☐ General Other (specify) ▼  State Zip Code UT 84110  ment For: 2014	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens	Other (specify) General Other (specify)  State Zip Code UT 84110  ment For: 2014 Primary General	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens  Office Sought:  House Senate  Disburse	Primary ☐ General Other (specify) ▼  State Zip Code UT 84110  ment For: 2014	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens  Office Sought:  House Senate President  Disburse	Other (specify) General Other (specify)  State Zip Code UT 84110  ment For: 2014 Primary General	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens  Office Sought:  House Senate President  Disburse	Other (specify) General Other (specify)   State Zip Code UT 84110  ment For: 2014 Primary General Other (specify)   Other (specify)	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Ann McLane Kuster  Office Sought:  Senate President State: NY District: 02  Full Name (Last, First, Middle Initial)  C. Owens for Congress  Mailing Address P.O. Box 2786  City Salt Lake City Purpose of Disbursement Contribution  Candidate Name  Douglas H. Owens  Office Sought:  House Senate President State: UT District: 04	Other (specify) General Other (specify)   State Zip Code UT 84110  ment For: 2014 Primary General Other (specify)   Other (specify)	Category/ Type  011  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  Louise's PAC	nents may not be sold or used the and address of any political	by any person committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Ron Barber for Congress  Mailing Address P.O. Box 57715			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code AZ 85732		Transaction ID : SB23.4142
Candidate Name  Ronald Barber  Office Sought: House Disbursem  Senate	nent For: 2014 Primary General	001 Category/ Type	Amount of Each Disbursement this Period 1000.00
State: AZ District: 02  Full Name (Last, First, Middle Initial)  B.	Other (specify) Recount		Date of Disbursement
Mailing Address  City S  Purpose of Disbursement	State Zip Code		
Candidate Name  Office Sought: House Disbursem	nent For:	Category/ Type	Amount of Each Disbursement this Period
	Primary ☐ General Other (specify) ▼		
Full Name (Last, First, Middle Initial)  Mailing Address			Date of Disbursement
	State Zip Code		
Purpose of Disbursement  Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		·····	1000.00
TOTAL This Period (last page this line number only).			3500.00

## SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	8	OF	9	
FOR	LINE	21a (	OF FORM	л 3X

NAME OF COMMITTEE (In Full)

L	ouise's PAC				
A.	Full Name (Last, First, Middle Initial)	Transactio	n ID : H4.4124		Allocated Activity or Event:
	UPS Store				Administrative Fundraising Exempt
	Mailing Address 3518 Fremont Avenue Nort	h #545			Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Seattle Pickerson of Diskurson orti	WA	98103		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Shipping			001	2545.64
	Activity or Event Identifier: Administrative			Category/ Type	Date 10 24 2014
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	45.64		7	0.00	45.64
<u>—</u> В.	Full Name (Last, First, Middle Initial)	Transaction	n ID : H4.4125		Allocated Activity or Event:
	Eckert & Associates				Administrative Fundraising Exempt
	Mailing Address P.O. Box 15402				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Washington	DC	20003		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Event Planning Fee			001	3045.64
	Activity or Event Identifier: Administrative			Cotogony	M = M / D = D / Y = Y = Y
	- Administrative			Category/ Type	Date 10 24 2014
	EEDEDAL OLIADE		NONFEDERAL	OLIABE	TOTAL AMOUNT
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	500.00		NONFEDERAL	0.00	= TOTAL AMOUNT 500.00
<u></u>	500.00  Full Name (Last, First, Middle Initial)		n ID : H4.4128		500.00 Allocated Activity or Event:
c.	500.00  Full Name (Last, First, Middle Initial) Chris Harris	Transactio	7 7		500.00
<u>c.</u>	500.00  Full Name (Last, First, Middle Initial)	Transactio	7 7		Allocated Activity or Event:
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City	Transactio	7 7		Allocated Activity or Event:  Administrative Fundraising Exempt
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City Rochester	Transactio	n ID : H4.4128		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee	Transactio	In ID : H4.4128		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City Rochester Purpose of Disbursement:	Transactio	In ID : H4.4128	0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
C.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative	State NY	Zip Code 14607	0.00  001  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier:	Transactio	In ID : H4.4128	0.00  001  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative	State NY	Zip Code 14607	0.00  001  Category/ Type  SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT
	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative	State NY +	Zip Code 14607	0.00  001  Category/ Type  SHARE  0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT
	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE  500.00	State NY +	zip Code 14607 NONFEDERAL	0.00  001  Category/ Type  SHARE  0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT
sı	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE  500.00  JBTOTAL of Allocated Federal and NonFede FEDERAL SHARE	State NY +	Zip Code 14607 NONFEDERAL	0.00  Out Category/ Type SHARE 0.00  SHARE 0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT  TOTAL AMOUNT
sı	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE  500.00  JBTOTAL of Allocated Federal and NonFedered FEDERAL SHARE	State NY +	Zip Code 14607 NONFEDERAL	0.00  Out Out Out Out Out Out Out Out Out Ou	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT  TOTAL AMOUNT
sı	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE  500.00  JBTOTAL of Allocated Federal and NonFede FEDERAL SHARE  1045.64	State NY +	Zip Code 14607 NONFEDERAL	0.00  Out Out Out Out Out Out Out Out Out Ou	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3545.64  Date 10 24 2014  TOTAL AMOUNT  TOTAL AMOUNT  1045.64  are to 21(a)(ii))

## SCHEDULE H4 (FEC Form 3X)

## DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	9	0	F	9	
FOR	LINE	21a	OF	FORM	3X

NAME OF COMMITTEE (In Full)

L	ouise's PAC				
A.	Full Name (Last, First, Middle Initial) UPS Store	Transactio	n ID : H4.4139		Allocated Activity or Event:  X Administrative Fundraising Exempt
	Mailing Address 3518 Fremont Avenue North	h #545			Voter Drive Direct Candidate Support
	City Seattle	State WA	Zip Code 98103		Public Comm (ref to party only) by PAC
	Purpose of Disbursement: Shipping		00.00	001	Allocated Activity or Event Year-To-Date 3586.79
	Activity or Event Identifier: Administrative			Category/ Type	Date 11 04 2014
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	41.15		7	0.00	41.15
В.	Full Name (Last, First, Middle Initial) Eckert & Associates	Transaction	n ID : H4.4140		Allocated Activity or Event:  Administrative Fundraising Exempt
	Mailing Address P.O. Box 15402				Voter Drive Direct Candidate Support
	City Washington	State DC	Zip Code 20003		Public Comm (ref to party only) by PAC
	Purpose of Disbursement: Event Planning Fee			001	Allocated Activity or Event Year-To-Date 4086.79
	Activity or Event Identifier: Administrative			Category/ Type	Date 11 10 2014
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	FEDERAL SHARE 500.00	·	NONFEDERAL	SHARE 0.00	= TOTAL AMOUNT 500.00
<u> </u>			NONFEDERAL		500.00 Allocated Activity or Event:
C.	500.00  Full Name (Last, First, Middle Initial)	Transactio	7		500.00
C.	Full Name (Last, First, Middle Initial) Chris Harris	Transactio	n ID : H4.4141 Zip Code		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City	Transactio	n ID : H4.4141		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City Rochester Purpose of Disbursement:	Transactio	n ID : H4.4141 Zip Code	0.00  001  Category/	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier:	State NY	n ID : H4.4141 Zip Code	0.00  001  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79
c.	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative	Transactio	In ID: H4.4141  Zip Code 14607	0.00  001  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79  Date 11 10 2014
	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE	State NY	n ID : H4.4141  Zip Code 14607  NONFEDERAL	0.00  001  Category/ Type  SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79  Date 11 10 2014
	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester  Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative	State NY	n ID : H4.4141  Zip Code 14607  NONFEDERAL	0.00  Out Category/ Type SHARE 0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79  Date 11 10 2014
	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North City Rochester Purpose of Disbursement: Event Planning Fee Activity or Event Identifier: Administrative  FEDERAL SHARE 500.00	State NY +	n ID : H4.4141  Zip Code 14607  NONFEDERAL	0.00  Out Category/ Type SHARE 0.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79  Date 11 10 2014  TOTAL AMOUNT
SI	Full Name (Last, First, Middle Initial) Chris Harris Mailing Address 274 Goodman Street North  City Rochester Purpose of Disbursement: Event Planning Fee  Activity or Event Identifier: Administrative  FEDERAL SHARE  500.00  JBTOTAL of Allocated Federal and NonFeder FEDERAL SHARE	State NY +	NONFEDERAL  NONFEDERAL	0.00  Out Out Out Out Out Out Out Out Out Ou	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  4586.79  Date 11 10 2014  TOTAL AMOUNT  TOTAL AMOUNT